DATE	OAG	RECEIVED	



PEACE OFFICER INVOLVED INJURIES OR DEATH REPORT

As required by Art. 2.139 of the Texas Code of Criminal Procedure, law enforcement agencies shall report all officer-involved injuries or deaths caused by the discharge of a firearm. Pursuant to the requirements of Art. 2.139, the following reporting form has been created for reporting such incidents.

"Officer-involved injury or death" means an incident during which a peace officer discharges a firearm causing injury or death to another." Art. 2.139 Code of Criminal Procedure.

Email completed form to: officershootingreport@texasattorneygeneral.gov

DATE OF REPORT 03/29/2017		
AGENCY/FACILITY INFORMATION		
Name of Agency/Facility Texas Department of Public Safe	ety	
Address 5805 N. Lamar Blvd, Box 4087		
City Austin	Zip Code 78773-0001	
Telephone Number (512) 424-2000		
Signature of Director of Agency/Facility (Required)	c m car	
Name of Person Filling Out Form James A. Kain, Sergeant		
Email of Person Filling Out Form james.kain@dps.texas.gov	/	
1. WHAT WAS THE INJURED OR DECEASED'S GENDER?	8. WHAT WAS THE PEACE OFFICER'S GENDER?	
✓ Male ☐ Female	✓ Male ☐ Female	
2. WHAT WAS THE INJURED OR DECEASED'S AGE AT TIME OF INCIDENT?	9. WHAT WAS THE PEACE OFFICER'S AGE AT THE TIME OF THE INCIDENT?	
27 □ Not Available	44	
3. WHAT WAS THE INJURED OR DECEASED'S RACE/ETHNICITY? (Mark one based on information reported on state driver license application, state identification card application, or other government reported identification if available	10. WHAT WAS THE PEACE OFFICER'S RACE/ETHNICITY? (Mark only one)	
and known. If not available, mark not available.)	☐ American Indian ☐ Black or African American	
☐ American Indian ☐ Black or African American	or Alaska Native Hispanic or Latino	
or Alaska Native ☐ Hispanic or Latino ✓ Anglo or White ☐ Other	✓ Anglo or White □ Other	
☐ Asian or Pacific Islander ☐ Not Available	Asian or Pacific Islander	
Asian of Facilic Islander Not Available	11. DURING THE INCIDENT, PEACE OFFICER WAS:	
4. DATE OF INCIDENT	☐ On Duty ☐ Off Duty	
Month 03 Day 29 Year 2017 TIME: Hour 11 Min 11 □ AM 12 PM	12. PEACE OFFICER WAS RESPONDING TO CALL OR REQUEST WITH ONE OR MORE OFFICERS:	
5. LOCATION OF INCIDENT	☐ Yes ✓ No	
Street address FM1752 - North of FM 898	13. INCIDENT OCCURRED DURING OR AS A RESULT OF A:	
City Unincorporated	☐ Emergency Call or Request for Assistance	
County Fannin Zip NA	✓ Traffic stop	
	Execution of a warrant	
6. INCIDENT RESULTED IN: Injury Death	☐ Hostage, barricade, or other emergency situation	
7. INJURED OR DECEASED PERSON:	✓ Other – Specify type of call	
☐ Carried, exhibited or used a deadly weapon	Vehicle Pursuit with Stolen Vehicle	
☑ Did not carry, exhibit or use a deadly weapon		